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Attorney Docket Number

DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	1			
220.011	· · · · · · · · · · · · · · · · · · ·	Everton Davis			
PATENT APPLICATION	DECION				
(37 CFR 1.63)	Application Number				
Declaration Declaration	Filing Date				
Submitted OR Submitted after Initial	Art Unit				
With Initial Filing (surcharge Filing (37 CFR 1.16 (e))	Examiner Name				
required)	CAMINET NUMB	<i>-</i>			
I hereby declare that:					
Each inventor's residence, mailing address, and citizenship are	as stated below next to the	eir name.			
I believe the inventor(s) named below to be the original and first which a patent is sought on the invention entitled:	t inventor(s) of the subject	matter which is claimed and for			
"Locator Apparatus"					
		}			
(Title of the specification of which	e Invention)				
is attached hereto					
OR	٦				
was filed on (MM/DD/YYYY)	as United States Appl	ication Number or PCT International			
Application Number and was amend	ed on (MM/DD/YYYY)	(if applicable).			
I hereby state that I have reviewed and understand the content	` <u>L</u>				
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[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (10-00)

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DECLARATION — Utility or D sign Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:	tor				
Given Name Everton Family Name Davis (first and middle [if any]) or Surname					
Inventor's Signature Date 23003					
Woodland Hills CA USA Country Citizenship					
Mailing Address 6121 Glade Ave. B 109					
Mailing Address					
Woodland Hills CA 91367 USA City State CA ZIP Country					
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inven	tor				
Given Name (first and middle [if any]) Family Name or Surname					
Inventor's Signature					
Residence: City State Country Citizenship					
Mailing Address					
Mailing Address					
City State ZIP Country Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

PTO/SB/09 (12-97)

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STATEMENT CLAIMING SMAL 37 CFR 1.9(f) & 1.27(b))INDE		Docket Number (Optional)
Applicant, Patentee, or Identifier: Ev	erton Davis	
Application or Patent No.:		
Filed or Issued:		
Title: "Locator Apparat		
As a below named inventor, I hereby for purposes of paying reduced fees	state that I qualify as an independent invento the Patent and Trademark Office describe	tor as defined in 37 CFR 1.9(c) ed in:
the specification filed herewith	with title as listed above.	
the application identified abov	e.	
the patent identified above.		
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Everton Davis NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
Signature of inventor	Signature of inventor	Signature of inventor
(X/08/10 003) Date	Date	Date

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number		
Filing Date		
First Named Inventor	Everton Davis	
Title		
Group Art Unit		
Examiner Name		
Attorney Docket Number		

I hereby appoint:			Pl	ace Customer	
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OR Practitioner(s) na	amed below:		La	iber fiere	
-E-J Fractitioner(s) na	وبالمسين المسيد المسيد بالمسيد المسيد ال		Pegistration	Number	
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Mat	Matthew J. Peirce, Esq.		41,245		
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 -	~~				
Applicant/Invent	JI.				
Assignee of reco	ord of the entire interest. See 37 CFR 3	.71.			
Statement under	r 37 CFR 3.73(b) is enclosed. (Form P	TO/SB	/96).		
	SIGNATURE of Applicant or Assign	nee of	Record	···	· · · · · · · · · · · · · · · · · · ·
Name	Everton Davis				
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Signature	- War				
Date We	of State or application of report of the entire interest	ou that	rompoontative/al	are required Culturit must	ultiple
forms if more than one signature	ntors or assignees of record of the entire interest is required, see below*.	r or men	representative(s) :	are required. Submit mu	mipi e
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